

05-11321-WGY

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 		A. Signature X <i>Debra Rice</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee	
1. Article Addressed to: Condoletzza Rice Secretary of State US Department of State 2201 C Street, NW Washington, DC 20520		B. Received by (Printed Name) C. Date of Delivery 7/11/05	
		D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
		3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input checked="" type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.	
		4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	
2. Article Number (Transfer from service)		7002 2410 0003 5835 2060	
PS Form 3811, February 2004		Domestic Return Receipt 102595-02-M-1540	

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 		A. Signature X <i>Debra Rice</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee	
1. Article Addressed to: U.S. Department of State 2201 C Street, NW Washington, DC 20520		B. Received by (Printed Name) C. Date of Delivery 7-11-05	
		D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
		3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.	
		4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	
2. Article Number (Transfer from service)		7002 2410 0003 5835 2077	
PS Form 3811, February 2004		Domestic Return Receipt 102595-02-M-1540	

QUICKSERV
ALLSTATE PROCESS SERVERS

JUNE 28, 2005

05-11321-WGY

RETURN OF SERVICE

I this day *SERVED* the within named **CONDOLEEZZA RICE**
SECRETARY OF STATE
US ATTORNEY OFFICE

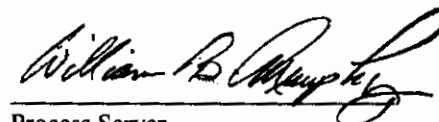
by delivering to **TRAN OANH, RECEPTIONIST, OFFICE OF**
ATTORNEY GENERAL, 12:55 PM

☒ in hand

No. **ONE COURTHOUSE WAY**
in the **BOSTON** District of said **SUFFOLK** County an attested
copy of the **SUMMONS AND COMPLAINT**

Service and travel 28

it being necessary I actually used a
motor vehicle in the distance of
10 miles in the service of
this process


Process Server

June 29, 2005

RETURN OF SERVICE

05-11321-WGY

I this day SERVED the within named

CONDOLEEZZA RICE
SECRETARY OF STATE
US DEPARTMENT OF STATE

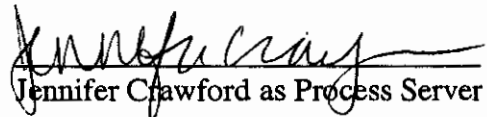
by delivering to

CONDOLEEZZA RICE

by certified mail return receipt required

No. 2201 C STREET NW

*in the WASHINGTON District of said DISTRICT OF COLUMBIA County an attested
copy of the SUMMONS AND COMPLAINT*


Jennifer Crawford as Process Server

June 29, 2005

05-11321-WGY

RETURN OF SERVICE

I this day SERVED the within named

U.S. DEPARTMENT OF STATE

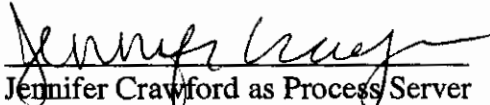
by delivering to

U.S. DEPARTMENT OF STATE

by certified mail return receipt required

No. 2201 C STREET NW

*in the WASHINGTON District of said DISTRICT OF COLUMBIA County an attested
copy of the SUMMONS AND COMPLAINT*


Jennifer Crawford as Process Server